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I hereby certify that this correspondence is being deposited with the United States Postal Service, utilizing the "Express Mail Post Office to Addressee" service addressed to **Assistant Commissioner for Patents, Washington, DC 20231** and mailed on the above Date of Mailing with the above "Express Mail" mailing label number.

Tracy L. Morton (Signature)
Tracy L. Morton
Signature Date: December 27, 1999

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application) PATENT APPLICATION
)
Inventor(s): Terry Hermiston)
Julie Nye)
)
SC/Serial No.: Unknown)
)
Filed: Herewith)
)
Title: **Adenovirus E1B Shuttle Vectors**)
_____)

APPLICATION TRANSMITTAL LETTER

Box PATENT APPLICATION
Assistant Commissioner for Patents
Washington, DC 20231

Sir:

Transmitted herewith for filing is the patent application identified as follows:

Inventor(s): Terry Hermiston and Julie Nye

Title: **ADENOVIRUS E1B SHUTTLE VECTORS**

05472691-122799

No. of pages in Specification: 29; No. of Claims: 12.

No. of Sheets of Drawings: 10; Formal: X; Informal: _____.

Also enclosed are:

[X] Declaration for Patent Application and Power of Attorney.

Preliminary Amendment

In the Specification:

Page 1, after the title, add a new paragraph

-- This Application claims priority from U.S. Provisional Application No.
60/117,814, filed January 28, 1999 and U.S. Provisional Application No.60/157,288,
filed October 1, 1999. --

The filing fee pursuant to 37 C.F.R. § 1.16 is determined as follows:

No. Filed	No. Extra	Rate Small Entity/ Large Entity		
Basic Fee		\$380.00 760.00	=	\$760.00
Total Claims <u>12</u> - 20 =	<u>0</u> *	X \$ 9.00 18.00	=	\$0
Independent Claims <u>3</u> - 3 =	<u>0</u> *	X \$ 39.00 78.00	=	\$0
First Presentation of Multiple Dependent Claim(s) <u>1</u>		\$130.00 260.00	=	\$260.00
		Total:	=	\$1,020.00

*If the difference is less than zero, enter "0".

[X] Please charge Deposit Account No. 15-0615 in the amount of \$1,020.00. A duplicate copy of this authorization is enclosed.

[X] The Commissioner is hereby authorized to charge underpayment of any fees (including those listed below) or credit any overpayment associated with this communication to Deposit Account No. 15-0615. A duplicate copy of this authorization is enclosed.

[X] Any additional filing fees under 37 C.F.R. § 1.16.

[X] Any patent application processing fees under 37 C.F.R. § 1.17.


This application is filed pursuant to 37 C.F.R. § 1.53 in the name of the above-identified Inventor(s).

Please direct all correspondence concerning the above-identified application to the following address:

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Telephone: (510) 262-8710

Respectfully submitted,

Date: December 27, 1999

By: 
Gregory Giotta
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